

The filing of this Statement does not amend any UCC record. This Statement is for informational purpose only.

CORRECTION STATEMENT						
	LOW INSTRUCTIONS (front and back) CAREFULLY AME & PHONE OF PERSON FILING THIS STATEMENT [Optional]		٦			
B. S	END ACKNOWLEDGMENT TO: [Name and Address]		1			
	I					
	L	_	THE ABOVE SPACE	IS FOR FILING OFFICE USE	ONLY	
1. ld	entification of the RECORD to which this CORRECTION STATEMEN 1a. TYPE OF RECORD	Γ relates.	1b. FILE # OF INITIAL FINANCING ST.	ATEMENT		
	Ta. THE OF NEODID		IB. TIEE # OF INTIAET INANGING OIL	ALEMENT		
2a.						
	Provide the basis for the belief of the person identified in item 4 that the RECORD identified in item 1 is inaccurate and indicate the manner in which the person believes the RECORD should be amended to cure the inaccuracy.					
2b. RECORD was wrongfully filed.						
Provide the basis for the belief of the person identified in item 4 that the RECORD identified in item 1 was wrongfully filed.						
	3. If this CORRECTION STATEMENT relates to a RECORD filed[or recorded] in a filing office describe in Section 9-501(a)(1) and this CORRECTION STATEMENT is filed in such a filing office, provide the date [and time] on which the INITIAL FINANCING STATEMENT identified in item 1b above was filed [or recorded].					
	3a. TYPE OF RECORD		3b. TIME			
4. NAME OF PERSON AUTHORIZING THE FILING OF THIS CORRECTION STATEMENT — The RECORD identified in item1 must be indexed under this name.						
4a. ORGANIZATION'S NAME						
<u>OR</u>	4b. INDIVIDUAL'S LAST NAME	FIRST NA	ME	MIDDLE NAME	SUFFIX	

Instructions for RHODE ISLAND UCC Correction Statement (Form UCC5)

Please type or laser-print this form. Be sure it is completely legible. Read all instructions, especially Instruction1a and 1b; correct identification of the initial Record to which this Correction Statement relates is crucial. Follow Instructions completely.

Fill in form very carefully. If you have questions, consult your attorney. Filing office cannot give legal advice. Do not insert anything in the open space in the upper portion of this form; it is reserved for filing office use.

When properly completed, send Filing Office Copy to filing office. If you want an acknowledgment, complete item B. Include a self-addressed stamped envelope to expedite the return of the acknowledgment.

- A. To assist filing offices that might wish to communicate with filer, filer may provide information in item A. This item is optional.
- B. Complete item B if you want an acknowledgment sent to you.
- 1. **General:** You must always complete items 1 and 4 and either 2a or 2b. You may also be required to complete item 3.
- 1a. Indicate type of Record to which this Correction Statement relates (e. g., Financing Statement or Amendment). You may also insert additional information that you believe will assist in identifying the Record (e.g., the filing date and/or record number of he Record).
- 1b. File number: Enter file number of initial financing statement to which the Record that is the object of this Correction Statement relates. Enter only one file number.
- If this Correction Statements filed based on the filer's belief that the Record identified in item 1is inaccurate, check box 2a, provide the basis for that belief, and indicate the manner in which the Record should be amended to cure the inaccuracy.

If this Correction Statement is filed based on the filer's belief that the Record identified in item 1was wrongfully filed, check box 2b and provide the basis for that belief.

- If this Correction Statement relates to a Record filed [or recorded] in a filing office described in Section 9-501(a)(1) and this Correction Statement is filed in such a filing office, provide the date [and time] on which the initial Financing Statement identified in item 1b above was filed [or recorded].
- Always enter name of the person who authorized the filing of this Correction Statement. This name must be the same as the name under which the Record is indexed.